

PEDEIVED CENTRAL FAX CENTER FEB 0 4 2008

Fax

Attention:	Group Art Unit: 1745	From:	Travis Dodd '
Fax:	571-273-8300	Fax:	818-833-2065
Phone:		Phone:	818-833-2014
Company:	.U.S. Patent and Trademark Office	Company:	Quallion LLC
		Pages:	Total of (12) Pages
Re:	Application Serial No.: 10/820,955 Title: BATTERY CONNECTION STRUCTURE AND METHOD Filed: April 7, 2004 Examiner: WILLS, Monique Group Art Unit: 1745 Attorney Docket No.: Q207-US1	Date:	February 4, 2008

If you have any questions or did not receive this transmission in its entirety, please call (818) 833-2000, extension 2014.

CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)

I hereby certify that the following documents are being facsimile transmitted to the United States Patent and Trademark Office, Fax No. <u>571-273-8300</u> on <u>February 4, 2008</u>:

Amendment Transmittal Letter (2 pages) Fee Transmittal (in duplicate) (2 pages) Amendment (8 pages)

Lisa K. Robbins

(Name of Person Signing Certificate)

(Signature)

Quallion LLC

PO Box 923127, Sylmar, CA 91392-3127 • PH: (818) 833-2000 • FAX: (818) 833-2065

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FEB 04 2008

TRANSMITTAL FORM (to be used for all correspondence after inklal filing) Total Number of Pages in This Submission Application Number 10/820,955 Filing Date April 7, 2004 First Named Inventor Berg, Paul et al. Group Art Unit 1745 Examiner Name Wills, Monique Attorney Docket Number Q207-US1

EN	ENCLOSURES (check all that apply)			
x Fee Transmittal Form	Assignment Papers (for an Application)	After Allowance Communication to Group		
x Fee Authorized	Drawing(s)	Appeal Communication to Board of Appeals and Interferences		
X Amendment	Licensing-related Papers	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)		
After Final	Petition to Covert to a Provisional Application	Proprietary Information		
Affidavits/declaration(s)	Power of Attorney, Revocation Change of Correspondence Address	Status Letter		
Extension of Time Request	Tembal Disclaimer	Other Enclosure(s) (please identify below):		
Express Abandonment Request	Request for Refund	·		
Information Disclosure Statement	CD, Number of CD(s)			
	Remarks			
Certified Copy of Priority Document(s)				
Response to Missing Parts/ Incomplete Application				
Response to Missing Parts under 37 CFR 1.52 or 1.53				
Customer Number or Bar Code Label	31815 (Insert Custamer No. or Altach bar code label here)			
The Commissioner is hereby authorized to charge a No. 50-0921. A duplicate copy of this sheat is endo	iny additional fees which may be required, or credit any sed.	overpayment to Deposit Account		
·	Respectfully submitted,	4		
•				
Dated: 2/4/2008	By:			
Phone: (818) 833-2003 Fax: (818) 833-2065	Travis Dodd Attorneys for Applicant(s P.O. Box 923127 Sylmar, CA 91392-3127)		
	CERTIFICATE OF MAILING			

	CERTIFICATE.OF MAILING				
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner of Patents and Trademarks, Washington, DC 20231 on this date:					
Typed or printed name	TRAVIS DODD		····		
Signature			Date		

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TRANSMITTAL FORM (to be used for all correspondence after Initial filing) Total Number of Pages in This Submission Application Number 10/820,955 Filling Date April 7, 2004 First Named Inventor Berg, Paul et al. Group Art Unit 1745 Examiner Name Wills, Monique Attorney Docket Number 0207-US1

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	Respectfully submitted,	4.	
	•		
Dated: 2/4/2008	Ву:		
Phone: (818) 833-2003	Travis Dodd		
Fax: (818) 833-2065	Attorneys for Applicant(s) P.O. Box 923127	·	
	Sylmar, CA 91392-3127		

	CERTIFICATE OF MAILING					
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Typed or printed name	TRAVIS DODD					
Signature			Date			

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FEB 04 2008

FEE TRANSMITTAL

Attorney Docket No.	Q207-US1
First Named Inventor:	BERG, Paul et al.
Application Number	10/820,955
Filing Date:	April 7, 2004
Examiner Name:	1745
Group/Art Unit:	Wills, Monique

TOTAL AMOUNT OF PAYMENT:	\$.00
METHOD OF PAYMENT (check One)	X The Commissioner is hereby authorized to charge indicated fees and/or credit any over payment to:
	Deposit Account No.: 50-0921 Deposit Account Name: Quallion LLC
	X. Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17
<u>.</u>	2 Payment Enclosed: Check Money Order Other - Credit Card

2. UTILITY Basic Filing Fee & Claims

(1) For	(2) No. filed	(3) No. extra	(4) Large Entity	(5) Small Entity	(6) Calculations
Basic Filing Fee	xx	xx	\$310.00	\$155.00	\$.00
Total Claims	24 - 26=	0	X \$50.00	X \$25.00	\$.00
Independent Claims	4-5=	0	X \$210.00	X \$105.00	\$.00
Multiple Dependent Cla	im(s) (if applicable))	\$360.00	\$180.00	\$.00
			Total of abo	ve Calculations =	\$.00

Basic Filing Fee	Large Entity	Small Entity	Total
Design filing fee	\$210.00	\$105.00	\$.00
Reissue filing fcc	\$310.00	\$155.00	\$.00
Provisional filing fee	\$210.00	\$105.00	\$.00
	Total of abo	ove Calculations =	\$.00

3. ADDITIONAL FEES

Fee Description	Large Entity	Small Entity	Other
	\$	S	S
	\$	\$	S
	\$	S	S
		\$	S
		TOTAL	: S

Name (print/type)	TRAVIS L. DODD	Registration N (Attorney/Ago		42,491
Signature		Date	2/4/200	08

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FEB 04 2008

FEE TRANSMITTAL

Attorney Docket No.	Q207-US1
First Named Inventor:	BERG, Paul et al.
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Group/Art Unit:	Wills, Monique

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Fee Description	Large Entity	Small Entity	Other
	5	5	\$
	S	S	S
	\$	\$	S
	S	\$	\$
		TOTAL	: S

Name (print/type)	TRAVIS L. DODD	Registration No.: (Attorney/Agent)		42,491
Signature		Date	2/4/20	08

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Application No: 10/820,955

Docket No.: Q207-US1

FEB 0 4 2008 Page 1

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

BERG, Paul et al.

Examiner:

WILLS, Monique

Serial No.: 10/820,955

Filed: April 7, 2004

Art Unit:

1745

Title: BATTERY CONNECTION

STRUCTURE AND METHOD

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

AMENDMENT AND REQUEST FOR RECONSIDERATION

This communication is in response to the Restriction Requirement mailed on October 2, 2007. Please amend the application as follows: